

## U.S. Department of Labor

Occupational Safety and Health Administration

401 New Karner Road

Suite 300

Albany, NY 12205

Phone: 518-464-4338 Fax: 518-464-4337



# Citation and Notification of Penalty

### To:

Oprandy's Fire & Safety Equipment, Inc.  
and its successors  
49 Brookline Ave  
Middletown, NY 10940

**Inspection Number:** 1125359

**Inspection Date(s):** 02/12/2016 - 02/12/2016

**Issuance Date:** 08/09/2016

### Inspection Site:

49 Brookline Ave  
Middletown, NY 10940

*The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.*

This Citation and Notification of Penalty (this Citation) describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed herein is (are) based on these violations. You must abate the violations referred to in this Citation by the dates listed and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and Notification of Penalty **you either call to schedule an informal conference (see paragraph below) or** you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. Please refer to the enclosed booklet (OSHA 3000) which outlines your rights and responsibilities and which should be read in conjunction with this form. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless this Citation is affirmed by the Review Commission or a court.

**Posting** - The law requires that a copy of this Citation and Notification of Penalty be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because of the nature of the employer's operations, where it will be readily observable by all affected employees. This Citation must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

**Informal Conference** - An informal conference is not required. However, if you wish to have such a conference you may request one with the Area Director during the 15 working day contest period. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation(s) and/or penalty(ies).

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of this Citation. The running of this contest period is not interrupted by an informal conference.

If you decide to request an informal conference, please complete, remove and post the Notice to Employees next to this Citation and Notification of Penalty as soon as the time, date, and place of the informal conference have been determined. Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

**Right to Contest** – You have the right to contest this Citation and Notification of Penalty. You may contest all citation items or only individual items. You may also contest proposed penalties and/or abatement dates without contesting the underlying violations. **Unless you inform the Area Director in writing that you intend to contest the citation(s) and/or proposed penalty(ies) within 15 working days after receipt, the citation(s) and the proposed penalty(ies) will become a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency.**

**Penalty Payment** – Penalties are due within 15 working days of receipt of this notification unless contested. (See the enclosed booklet and the additional information provided related to the Debt Collection Act of 1982.) Make your check or money order payable to “DOL-OSHA”. Please indicate the Inspection Number on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type “OSHA” and click Go. From the results, click on **OSHA Penalty Payment Form**. The direct link is:

<https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>.

You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will process the payments as if these restrictions or conditions do not exist.

**Notification of Corrective Action** – For each violation which you do not contest, you must provide *abatement certification* to the Area Director of the OSHA office issuing the citation and identified above. This abatement certification is to be provided by letter within 10 calendar days after each abatement date. Abatement certification includes the date and method of abatement. If the citation indicates that the violation was corrected during the inspection, no abatement certification is required for that item. The abatement certification letter must be posted at the location where the violation appeared and the corrective action took place or employees must otherwise be effectively informed about abatement activities. A sample abatement certification letter is enclosed with this Citation. In addition, where the citation indicates that *abatement documentation* is necessary, evidence of the purchase or repair of equipment, photographs or video, receipts, training records, etc., verifying that abatement has occurred is required to be provided to the Area Director.

**Employer Discrimination Unlawful** – The law prohibits discrimination by an employer against an

employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he/she has been discriminated against may file a complaint no later than 30 days after the discrimination occurred with the U.S. Department of Labor Area Office at the address shown above.

**Employer Rights and Responsibilities** – The enclosed booklet (OSHA 3000) outlines additional employer rights and responsibilities and should be read in conjunction with this notification.

**Notice to Employees** – The law gives an employee or his/her representative the opportunity to object to any abatement date set for a violation if he/she believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above and postmarked within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and Notification of Penalty.

**Inspection Activity Data** – You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this citation. You are encouraged to review the information concerning your establishment at [www.osha.gov](http://www.osha.gov). If you have any dispute with the accuracy of the information displayed, please contact this office.

## CERTIFICATION OF CORRECTIVE ACTION WORKSHEET

Company Name: Oprandy's Fire & Safety Equipment, Inc.  
Inspection Site: 49 Brookline Ave, Middletown, NY 10940  
Issuance Date: 08/09/2016

**Inspection Number: 1125359**

List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return to: **U.S. Department of Labor – Occupational Safety and Health Administration, 401 New Karner Road, Suite 300, Albany, NY 12205**

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Title

**NOTE: 29 USC 666(g)** whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment of not more than 6 months or both.

**POSTING:** A copy of completed Corrective Action Worksheet should be posted for employee review



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 1** Type of Violation: **Serious**

OSH ACT of 1970 Section (5)(a)(1): The employer did not furnish employment and a place of employment which is free from recognized hazards that were likely to cause death or serious physical harm to employees in that employees were exposed to potential explosion hazards when transfilling and servicing compressed gas cylinders and fire extinguishers:

(a) Oprandy's Fire Safety Equipment, back room: On or prior to 2/12/16, employees were exposed to explosion hazards when transfilling a low pressure kitchen fire suppression cylinders, including but not limited to a Worthington Industries DOT 4BW-225 M4543 wet chemical fire suppression cylinder, from a high pressure Poseidon breathing air cascade system, where regulated fill pressure was set in excess of the listed service pressure of the cylinder being filled.

(b) Oprandy's Fire Safety Equipment, back room and during field service and testing: On or prior to 2/12/16, wet-chemical fire suppression cylinders, including but not limited to a Worthington Industries DOT 4BW-225 wet chemical fire suppression tank, were used for purposes other than what they were designed for, in that the Worthington Industries DOT 4BW-225 M4543 wet chemical fire suppression cylinder was used as a portable compressed air receiver.

(c) Oprandy's Fire & Safety Equipment, service/filling area and back room: On or prior to 2/12/16, employees were not trained in procedures for transfilling cylinders, including but not limited to: safe work procedures, troubleshooting problems which occurred during filling, safe use of pressure regulators, and recognition and avoidance of potentially hazardous situations that might occur during filling.

(d) Oprandy's Fire Safety Equipment, service/filling area: On or prior to 2/12/16, employees were exposed to explosion hazards when performing proof-pressure testing (hydrostatic testing) and charging dry and wet chemical fire extinguishers without use of a protective cage, barrier, or similar safety device.



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

Among other methods, one feasible means of abatement for this hazard is to ensure that transfilling operations and fire extinguisher service and maintenance comply with the requirements of Compressed Gas Association (CGA) pamphlet P-1 -- 2015, and NFPA 10, 2012, -- Portable Fire Extinguishers, Chapter 7, Inspection, Maintenance, and Recharging, and ensure that the following provisions are met:

- Train personnel in the safe handling of compressed gas containers (CGA P-1 --2015, section 5.6). Ensure that transfilling (transfer of compressed gas from one container to another) is performed by trained personnel who use equipment designed for this purpose and follow written operating procedures (CGA P-1 -- 2015, section 5.7)
- Certify all personnel performing maintenance and recharging of portable fire extinguishers (NFPA 10, 2012, 7.1.2.1). Have a certified person directly supervise persons training to perform maintenance and servicing of extinguishers (NFPA 10, 7.1.2.1.2)
- Have available the appropriate manufacturers servicing manuals, the correct tools, recharge materials, lubricants, and manufacturers replacement parts or parts specifically listed for use in the fire extinguisher (NFPA 10, section 7.1.2.2). Charge rechargeable stored-pressure type fire extinguishers only to the pressure specified on the fire extinguisher nameplate (NFPA 10, section 7.7.4.5)
- Connect the manufacturers pressurizing adapter to the valve before the fire extinguisher is pressurized (NFPA 10, section 7.7.4.5.2). Set regulator pressure to no more than 25psi above the operating (service) pressure (NFPA 10, section 7.7.4.5.2)
- Do not use an unregulated pressure source (NFPA 10, section 7.7.4.5.3). Do not use fire extinguishers for any other purpose (NFPA 10, section 7.9)

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

**Date By Which Violation Must be Abated:**  
**Proposed Penalty:**

**08/27/2016**  
**\$3741.00**

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

**Citation 1 Item 2** Type of Violation: **Serious**

29 CFR 1910.101(c): Compressed gas cylinders, portable tanks, and cargo tanks did not have pressure relief devices installed and maintained in accordance with Compressed Gas Association Pamphlets S-1.1-1963 and 1965 addenda and S-1.2-1963:

(a) At the worksite and on jobsite(s): On or prior to 2/12/16, fire suppression cylinder "test tanks", including but not limited to a Worthington Industries DOT 4BW 225 tank, marked M4543, date of manufacture August 1998, which was used as a portable air tank, was not equipped with a pressure relief device.

On 2/12/16, two employees were severely injured when a tank exploded while they were attempting to fill it with compressed air.

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:  
Proposed Penalty:

08/17/2016  
\$3741.00

U.S. Department of Labor  
Occupational Safety and Health Administration

Inspection Number: 1125359  
Inspection Date(s): 02/12/2016 - 02/12/2016  
Issuance Date: 08/09/2016



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 3** Type of Violation: **Serious**

29 CFR 1910.132(d)(1): The employer did not assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment

(a) Main shop: On or prior to 2/12/16, the employer did not conduct an assessment of the workplace to determine if hazards associated with servicing and maintenance of fire extinguishers necessitated the use of personal protective equipment, including but not limited to: protective gloves, protective eyewear, and protective footwear.

Date By Which Violation Must be Abated:  
Proposed Penalty:

09/02/2016  
\$1604.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

U.S. Department of Labor  
Occupational Safety and Health Administration

Inspection Number: 1125359  
Inspection Date(s): 02/12/2016 - 02/12/2016  
Issuance Date: 08/09/2016



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 4** Type of Violation: **Serious**

29 CFR 1910.133(a)(1): Protective eye equipment was not required where there was a reasonable probability of injury that could be prevented by such equipment:

(a) Main shop, during servicing and maintenance of fire extinguishers: On or prior to 2/12/16, the employer did not require employees working in the shop to wear protective eyewear for protection from hazards including but not limited to: flying objects, extinguisher contents, or compressed gases.

Date By Which Violation Must be Abated:  
Proposed Penalty:

08/17/2016  
\$2672.00

U.S. Department of Labor  
Occupational Safety and Health Administration

Inspection Number: 1125359  
Inspection Date(s): 02/12/2016 - 02/12/2016  
Issuance Date: 08/09/2016



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 5** Type of Violation: **Serious**

29 CFR 1910.136(a): The employer did not ensure that each affected employee used protective footwear when working in areas where there was a danger of foot injuries due to falling or rolling objects, or objects piercing the sole, and where such employee's feet were exposed to electrical hazards:

(a) During servicing and maintenance of fire extinguishers: On or prior to 2/12/16, the employer did not required employees working in the shop to wear protective footwear for protection from falling, rolling, or dropped fire extinguishers, compressed gas cylinders, and related components.

Date By Which Violation Must be Abated:  
Proposed Penalty:

08/17/2016  
\$2672.00



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 6** Type of Violation: **Serious**

29 CFR 1910.176(b): Material stored in tiers was not stacked, blocked, interlocked or limited in height so that it was stable and secure against sliding and collapse:

(a) Main shop and back room: On or prior to 2/12/16, portable fire extinguisher(s) stored on rack storage unit(s) were not interlocked or secured to keep from falling.

(b) Main shop and back room: Compressed gas cylinders and fire extinguishers stored on floor were not secured to keep from falling.

Date By Which Violation Must be Abated:  
Proposed Penalty:

08/27/2016  
\$2672.00



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury or illness.

**Citation 1 Item 7 a** Type of Violation: **Serious**

29 CFR 1910.1200(e)(1): The employer did not develop, implement, and/or maintain at the workplace a written hazard communication program which describes how the criteria specified in 29 CFR 1910.1200(f), (g), and (h) will be met:

(a) At the worksite, during servicing and maintenance of fire extinguishers: On or prior to 2/12/16, the employer did not develop and implement a written hazard communication program where employees were exposed to hazardous chemicals including, but not limited to: pressurized dry and wet chemical fire extinguisher units containing asphyxiant gases such as nitrogen and carbon dioxide, compressed gas cylinders containing compressed air, carbon dioxide, oxygen, and nitrogen, and fire suppression chemicals such as wet chemical solution, which is corrosive.

Date By Which Violation Must be Abated:  
Proposed Penalty:

08/27/2016  
\$2672.00



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 7 b** Type of Violation: **Serious**

29 CFR 1910.1200(g)(8): The employer did not maintain in the workplace copies of the required safety data sheets for each hazardous chemical:

(a) At the worksite, during servicing and maintenance of fire extinguishers: On or prior to 2/12/16, the employer did not maintain Safety Data Sheets for hazardous chemicals including, but not limited to: pressurized dry and wet chemical fire extinguisher units containing asphyxiant gases such as nitrogen and carbon dioxide, compressed gas cylinders containing compressed air, carbon dioxide, oxygen, and nitrogen, and fire suppression chemicals such as wet chemical solution, which is corrosive.

Date By Which Violation Must be Abated:

08/27/2016



**Citation and Notification of Penalty**

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940

---

**Citation 1 Item 7 c** Type of Violation: **Serious**

29 CFR 1910.1200(h)(1): Employees were not provided effective information and training on hazardous chemicals in their work area at the time of their initial assignment and whenever a new hazard that the employees had not been previously trained about was introduced into their work area:

(a) At the worksite, during servicing and maintenance of fire extinguishers: On or prior to 2/12/16, the employer did not provide hazard communication training where employees were exposed to hazardous chemicals including, but not limited to: pressurized dry and wet chemical fire extinguisher units containing asphyxiant gases such as nitrogen and carbon dioxide, compressed gas cylinders containing compressed air, carbon dioxide, oxygen, and nitrogen, and fire suppression chemicals such as wet chemical solution, which is corrosive.

Date By Which Violation Must be Abated:

08/27/2016

A handwritten signature in black ink, appearing to read "Robert Garvey", with a long horizontal flourish extending to the right.

Robert Garvey  
Area Director

U.S. Department of Labor  
Occupational Safety and Health Administration  
401 New Karner Road  
Suite 300  
Albany, NY 12205  
Phone: 518-464-4338 Fax: 518-464-4337



## INVOICE / DEBT COLLECTION NOTICE

---

**Company Name:** Oprandy's Fire & Safety Equipment, Inc.  
**Inspection Site:** 49 Brookline Ave, Middletown, NY 10940  
**Issuance Date:** 08/09/2016

<b>Summary of Penalties for Inspection Number</b>	<b>1125359</b>
<b>Citation 1, Serious</b>	<b>\$19774.00</b>
<b>TOTAL PROPOSED PENALTIES</b>	<b>\$19774.00</b>

---

To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on **OSHA Penalty Payment Form**. The direct link is <https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>. You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will cash the check or money order as if these restrictions or conditions do not exist.


If a personal check is issued, it will be converted into an electronic fund transfer (EFT). This means that our bank will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will then usually occur within 24 hours and will be shown on your regular account statement. You will not receive your original check back. The bank will destroy your original check, but will keep a copy of it. If the EFT cannot be completed because of insufficient funds or closed account, the bank will attempt to make the transfer up to 2 times.

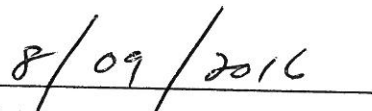
Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

**Interest:** Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is one percent (1%). Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

**Delinquent Charges:** A debt is considered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

**Administrative Costs:** Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.

  
Robert Garvey  
Area Director

  
Date